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**Mental
Health
Council**
OF TASMANIA



COVID-19 Impacts and Emerging Themes within the Mental Health Sector

Monthly Report, Dec 2020/Jan2021
Report 7

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About Us

The [Mental Health Council of Tasmania](#) (MHCT) is the peak body for community managed mental health services in Tasmania. We represent and promote the interests of our Members and work closely with Tasmanian Government agencies and Primary Health Tasmania to ensure sectoral input into public policies and programs. We have a strong commitment to enabling better mental health care access and outcomes for every Tasmanian. Our purpose is to strengthen and advocate for our communities and service providers to support the mental health and wellbeing of all Tasmanians, and our vision is that every Tasmanian has access to the resources and support needed for good mental health and wellbeing.

In response to the global COVID-19 pandemic, Federal and State government responded rapidly by implementing a raft of COVID-19 restrictions and social distancing measures in mid-March 2020. In order to clearly understand the impacts on the mental health sector, consumers and their families and friends, MHCT developed a COVID-19 Response and Recovery Strategy. The Strategy incorporates extensive and ongoing consultation which allows MHCT to map how these restrictions and their eventual easing are impacting mental health service delivery in our state. In addition, through engagement with service providers delivering psychosocial supports to the broader population in response to COVID-19, MHCT is also gaining understanding around whole-of-population mental health.

MHCT COVID-19 Response and Recovery Strategy

The strategy consists of three priority groups and through regular consultation and data collection aims to track how COVID-19 is impacting on the mental health sector, consumers, families and individuals experiencing psychological distress due to the pandemic.

- ▶ The **COVID-19 Mental Health Sector Network** aims to track the impacts of COVID-19 restrictions on Tasmanian Mental Health Sector service providers during the restriction period and beyond into the recovery phase. The Network provides a platform to identify the impact of COVID-19 on service delivery, workforce and client needs and will identify and track emerging issues. The network will provide a mechanism to provide direct and timely information to government, agencies and other key stakeholders as COVID-19 restrictions continue and as services respond to the lifting of restrictions.
- ▶ The **COVID-19 Psychosocial Supports Working Group** aims to provide a platform to capture data and evidence of cross-service collaboration to support people who have no history of mental-ill health, but due to the impacts of COVID-19 are experiencing varying levels of psychological distress. The Working Group members will capture shared data and emerging themes to inform State and Federal Government and relevant agencies on the level of demand and need in the Tasmanian community for psychosocial supports and services during the COVID-19 restriction period, into the recovery phase and beyond.
- ▶ The **COVID-19 Mental Health Consumer, Carer, Family and Friends Network** aims to monitor the impact of COVID-19 on people with pre-existing mental health needs prior to the COVID-19 pandemic along with their families, friends and carers. The Network will provide a platform for sharing the voice of lived experience during the COVID-19 restrictions and into the recovery phase. Network members will provide information on emerging themes and issues experienced by people with mental ill-health, their friends and family in relation to COVID-19 restrictions and beyond into the recovery phase. The Network will provide direct and timely information to government, agencies and other key stakeholders as COVID-19 restrictions continue and begin to ease.

Executive Summary

MHCT's COVID-19 December 2020/January 2021 Monthly Report provides insights into the impacts on the mental health sector and the Tasmanian community at a time when swift border closures were introduced over the Christmas/New Year period to address outbreaks in certain states. The Christmas/New Year period is often a peak time for increased mental health challenges, however MHCT has heard from service providers that during this year's Christmas/New Year they did not see significant increases in service demand in comparison to previous years.

It is important to note however, that many services are still at capacity and with limited available data on the number of people who have made inquiries to services but have been unable to access the service, it is difficult to gain a complete understanding of service demand. As 2021 unfolds, MHCT will work with service providers to build an understanding of the number of Tasmanians that are unable to access mental health supports. Collecting this data will assist in gaining a broader picture of the mental health needs of Tasmanians and inform future service planning.

Findings from MHCT's December/January report suggests that isolation and loneliness were prominent presenting issues, alongside depression/low mood and anxiety/fear. Family violence and relationship challenges also have increased during December 2020 and January 2021.

During the latter half of 2020, MHCT conducted several COVID19 mental health impact reports on identified cohorts (young people and older people) these reports highlighted barriers to accessing mental health supports including costs associated to primary care, transportation barriers, and limitations in the availability of services. Additionally, social isolation featured as a prominent factor impacting on older people's mental health.

Key actions:

- Consider strategies to alleviate pressure on mental health services including strategies to address workforce challenges and support services to meet greater complexity in client needs
- Support data collection to inform mental health referral pathways including data to better understand how many people are unable to access services and supports
- Consider strategies to address the mental health and wellbeing needs of older and younger Tasmanians
- Ensure programs and services continue to provide choice in methods of service delivery including face to face, in person options (unless state government COVID19 guidelines suggest otherwise).

Identified impacts during December 2020/January 2021

Impacts on Mental Health Service Providers

During December 2020 and January 2021, MHCT continued data collection to monitor trends and impacts experienced by mental health service providers via the COVID19 Mental Health Sector Network.

- In the reporting period, 26 November 2020 - 26 January 2021, 7 service providers responded to the COVID19 Mental Health Sector Network survey. Of those respondents, anxiety and depression were noted as the most common presenting causes for new referrals. This has been consistent with data collected since May 2020 indicating that anxiety and depression has remained a significant presenting cause for new referrals.
- 60% of respondents indicated they had no capacity to support new clients, with 40% of those respondents indicating they had a waitlist comprised of 5 to 20+ people. However, 40% of service providers indicated they had some capacity to support new clients.
- 57.14% of respondents noted that previous clients had re-engaged to seek renewed support. Several reasons for clients re-engaging included increased anxiety, family violence, stress and relationship breakdowns.
- Respondents to the COVID19 Mental Health Sector Network Survey indicated a slight increase in presenting themes related to family violence and suicidal ideation.
- Service Providers identified that clients are were referred into: social support services (85.71%); acute mental health services (57.14%); and, family violence and/or relationship services (57.14%)

'We continue to see demand from families under stress and pressure, many of whom are separating and under financial strain, and the children are externalising the stress in the family with extreme behaviours and suicidality. These children are still young and often emotionally immature children of 12 and 14 years and often disengaging with school but not suitable for youth services yet. The biggest gap continues to be 5-15 years'

-Comment from mental health service provider

(note: due to limited sample size, results may not be indicative of the whole community mental health sector.)

Mental health and wellbeing of Tasmanian young people

As understandings related to COVID19 impacts on young people's (12-25 years) mental health continued to emerge during 2020, MHCT conducted a state-wide consultation to better understand these impacts and potential solutions to support the mental wellbeing of Tasmania's next generation.

Consultation included targeted engagement with youth mental health services and more broadly with young people across the state in partnership with the Youth Network of Tasmania, as well as general community consultation. Altogether, MHCT consulted with 331 young people, 136 community members and 21 mental health service provider representatives.

During consultations Tasmanian young people and community members were asked to articulate the barriers to good mental health. The following barriers to good mental health were identified:

- bullying
- stigma related to mental ill-health
- marginalisation of identity groups
- limited social opportunities
- lack of hope and confidence in future opportunities
- lack of support for neurodiverse young people
- poor mental health literacy
- limited awareness of local supports
- unsustainable youth development initiatives

Consultation participants also described the many barriers to accessing mental health supports including, service availability, cost and inflexibility, digital exclusion, limited identity-based supports, inconsistent supports in rural and remote areas, difficulty engaging specialist mental health care and difficulty accessing National Disability Insurance Scheme (NDIS) funded supports.

Tasmanian young people and community members outlined a range of proposed solutions to the abovementioned barriers. These included improved access to mental health professionals, implementation of a central information access point and youth friendly community hubs, improvements to school culture in relation to mental health and in relation to bullying, along with increased activities for young people including youth development initiatives.

Youth consultations have been supported by state government as part of the COVID19 response. Further information on the above outcomes the consultations will be available in MHCT's upcoming Youth Mental Health Report.

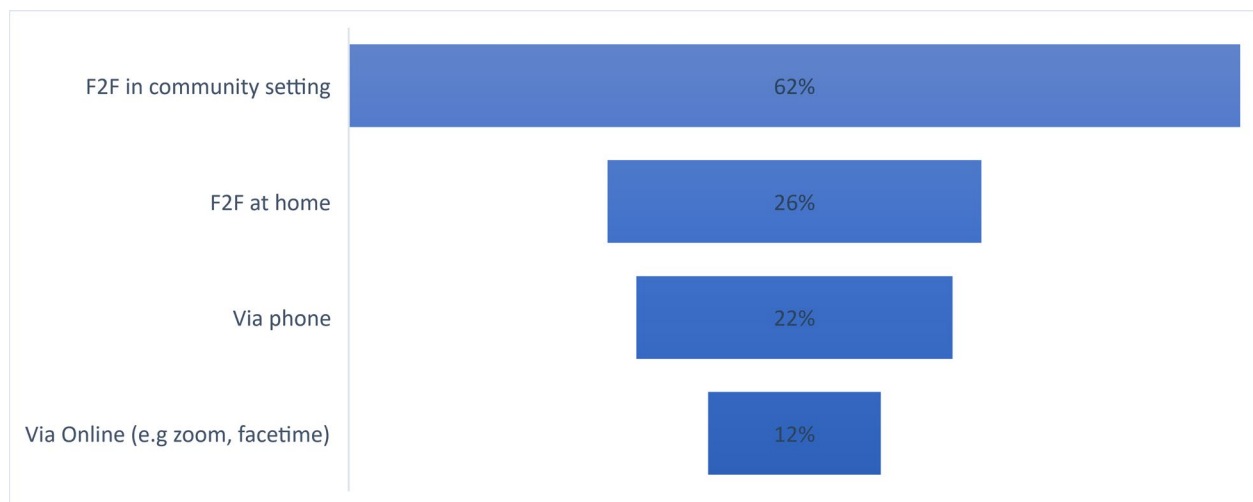
Impacts on Consumers, Carers, Family and Friends

During the pandemic and into the recovery phase, MHCT has collected information from Consumer, Carer, Family and Friends representative groups. The information collected provides an understanding of the impacts of the pandemic on these cohorts.

- During December 2020 to January 2021, mental health consumer groups noted little change in impact since the previous reporting period.

- Family and Friends representative organisations identified that family members have expressed concern about some supports solely offered online resulting in some consumers having limited choice in how the service is being delivered.
- MHCT's client survey on preferences to mental health service delivery indicated that 62% of clients preferred in person face to face (F2F) sessions, with 12% preferring video sessions. This indicates a need to ensure that services are continued to be funded to offer a choice of service delivery options for consumers.

Client's preferred methods of service delivery



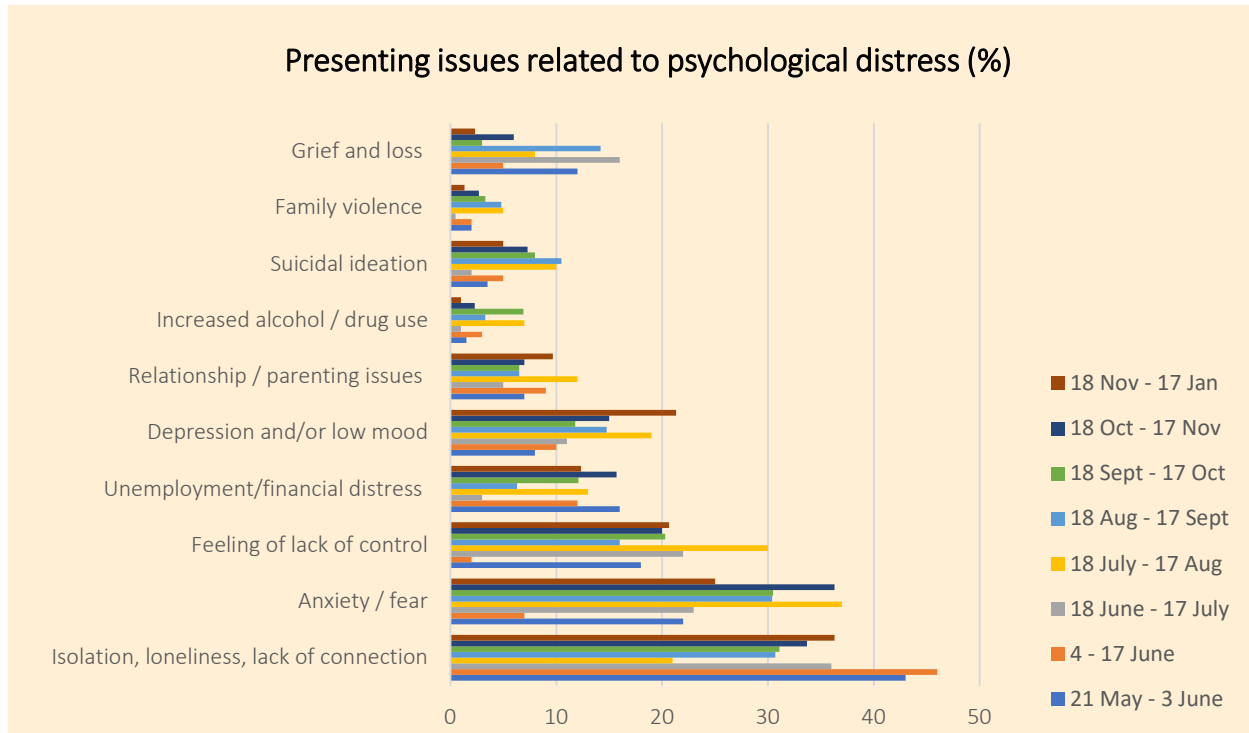
MHCT 2020, Client Survey Data Summary

Impacts on the mental health of Tasmanians

MHCT continued to collect data on whole of population mental health impacts due to the associated social and economic repercussions of the pandemic. Data has been collected from psychosocial support services who have been funded to provide mental health information and support to the community as part of the state government's COVID19 response.

- During the reporting period (18 November – 17 January), isolation, loneliness, and lack of connection was reported as the most commonly presenting issue. The presenting issue of depression/low mood also increased during the reporting period. Both presenting issues are commonly reported as increasing over Christmas/New Year period, however it is unclear if these increases are consistent with previous years.
- The presenting issue of anxiety/fear has decreased during the period however, continues to be the second most common presenting issue.
- The presenting issue of suicidal ideation, has been increasing since mid-July 2020, albeit a relatively smaller percentage than other presenting issues (10% 18 July – 17 Aug, 10.5% 18 Aug – 17 Sept, 8% 18 Sep-17 Oct), has seen a reduction from 7.3% to 5%

- Data during the reporting period (18 November 2020 – 17 January 2021) suggests an increase in presenting issues related to lack of information/confusion in regard to government messaging. This increase may reflect the impact of several border closures due to COVID19 outbreaks over the Christmas period.



- 54.50% of Tasmanians accessing psychosocial support services were listed for ongoing engagement (forward interactions booked). This is an increase from the previous reporting period (33.7%). 67% of these clients were advised on self-directed strategies such as mindfulness, self-soothing, diet or exercise. This is a considerable increase from the previous reporting period where advice on self-directed strategies was provided during 23.9% of total interactions and suggests that Tasmanians are accessing further supports to assist in working towards addressing their mental health and wellbeing.
- 4.18% of individuals were referred onward to other supports and services. Of the interactions that were referred onward, 17.94% was referred to other services, 3.55% of the individuals were referred to ACMHS/ CAMHS, 3.18% to physical health services like GP, physio, 0.89% to financial and employment services, 0.71% to alcohol and other drug services, 0.18% to family and relationship services.
- The small percentage of onward referrals (4.18%) may indicate challenges to accessing other supports due to service capacity limitations. This was indicated by one psychosocial support service that indicated people seeking mental health assistance are frustrated with the mental health system, particularly with regard to waiting times, and processes associated with NDIS.

- The three largest age cohorts accessing psychosocial support services during the reporting period were Tasmanians aged 61 - 70 years (32%) followed by 41 - 50 years (17.1%) and 31 – 40 years (14.8%).
- 11.5% of children under 18 years accessed psychosocial support services during the reporting period.

Impact of social isolation on older Tasmanians

Mental health continues to be a significant issue as the social and economic repercussions of the pandemic continue. All Tasmanians have been impacted in some way, however, older Tasmanians have felt the effects of social isolation significantly during the pandemic. MHCT contacted Alex Mummy, Project Officer of Council of the Aging (COTA) Tasmania to understand how the COVID-19 pandemic has impacted older Tasmanians.

Alex explained that anxiety within older Tasmanians was understandably heightened due to the increased risk of serious illness and/or death caused by COVID-19. Alex indicated that the increased risk during the height of the pandemic led to exacerbated experiences of social isolation. Even in the wake of the pandemic barriers to reengaging with the community continue with day-to-day activities such as regular walks-and-talks, voluntary service, social care and congregational gatherings still constricted to some degree.

Where younger populations may use social media as a means to counteract experiences of loneliness and social isolation, for many older Tasmanians, the need for social support and sense of belonging remain unmet due to limitations related to digital literacy and access to technology. Experiences of social isolation is significant contributor to impacts on an individual's mental health and wellbeing, however, barriers to accessing mental health supports continue to be an issue.

These barriers include:

- Limited mental health literacy - understanding situational distress and knowing when, where and how to access mental health supports.
- Stigma related to accessing mental health supports -
- Ageism resulting in misdiagnosis by health professionals

Alex stated that, "We have seen much greater appreciation from older people who have had the opportunity to re-engage with community activities, many people who were given the opportunity to do activities for Seniors Week late last year commented about how tough it has been and the benefit that re-engaging has given them to their mental health and the value that they do get from such activities."

As part of COVID-19 recovery plan, MHCT partnered with Primary Health Tasmania on a grants program to help community organisations encourage Tasmanians to get out and about and reconnect with their community. A total of 35 organisations received grants under the Australian Government-funded program, to run events and activities to reduce social isolation and loneliness. *Learning for Life with our Seniors* by La Trobe High School, *Crossroads* from Geeveston Community Centre and *Coming together and Connecting Through Music* initiated by Eaglehawk Neck Community and Hall Association are several of the activities focused on building mental health and wellbeing for older Tasmanians.

Further information

MHCT welcomes further discussion to support the mental health and wellbeing of all Tasmanians and to ensure the community managed mental health sector is well equipped to meet service demand. MHCT invites government and community stakeholders, MHCT members and other interested stakeholders to contact us to discuss the findings from the November 2020-January 2021 monthly report or to access the documents below:

- Psychosocial Supports Working Group collated data reports 18 November to 17 January 2021
- MH Sector Network survey summaries for 26 November 2020 – 26 January 2021
- Client Survey data summary, 2020

Support numbers

If you are struggling and need to talk to someone, please call:

- A Tasmanian Lifeline (8am – 8pm) - 1800 98 44 34

If you or someone you know is experiencing distress, please call:

- Lifeline - 13 11 14
- Kids Helpline - 1800 55 1800
- Mental Health Services Helpline - 1800 332 388

Mental Health Council of Tasmania
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